PROGRESS SHEET – APPLICATION FOR CHANGE/TRANSFER

NAME: Michael Buckley 11537 W. Hwy 12 Walla Walla, WA 99362 PHONE: (509) 529-2229 Cell 520-2229			Copies scanned & e-mailed to Department of Revenue: Date: Initial: Chg. Application ROE/ROD Assignment			
ASSIGNED (SEI	E BACK OF PAGE)					
APP. NO.	PERMIT NO.	CERT. NO.	AC 862	CERT. OF CH	ANGE NO(S) ol. 1, Pg. 482	
WALLA WALLA C	COUNTY WRIA	32		WRTS No. C	961805	
PURPOSE OF APPL	ICATION: Change POD &	à add 1 POD		Supersed	ing: 5199934	
Date Application rece	eived: Sept. 26, 2011	Date fe	e received: S	ept. 26, 2011	Amount: \$50.00	
즐게게하다 아래 맛이 없어요?	tional exam sent:					
	pletion or correction:			Receive		
	Application mapped	by:		date:		
PUBLICATION:				n OR The Waits		
OK'd by:			Date Notice Sent //-/7-2011			
Date Affidavit received: 12-28-2011			Time expires: 1-7-2012			
Checked by:			Date: 1-3-12			
Protests:			∐ Fee r	evd		
SEPA REQUIRED:	NO - EXEMPT					
FIELD EXAMINAT	ION REQUIRED:	YES	□ NO			
Examination by:		date:				
ROE map che	cked by:	date: _				
BC due: CC due: PA due:		BC rcvd:			ext:ext:	
		PA rcvd:				
PA FIELD EXAMI	NATION REQUIRED – D	DATE:		BY:		
Date OK'd for CHAN	NGE/TRANSFER:		By:			
Chg-ROE map checked by:						
*Statement of Fee Sent:			Fee Received:			
*Cert. Of Change	ONLY					
Date CHANGE ROE	ISSUED: 1-18-201	12	No			
	/D 6			·		
Change/Transfer to be processed by						
ROD received: 45 day review period ends:		d ends:	Review Period	d Extended to:	Ecy Decision Mailed:	
Dept of Archaeo Umatilla Indian	nomic Development District, 98 logy & Historic Preservation; I Reservation, Confederated Trib orth Discovery Place, Spokane V	P.O. Box 48343 es, P.O. Box 63	, Olympia, WA 9 8, Pendleton, Ol	98504-8343; Attn:	Gretchen Kaehler	

Superseding Cert, 3-27-2012

ASSIGNMENT INFO:

SUBJECT TO REAL ESTATE EXCISE TAX

Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:	Date:			
Phone #:	1			
Mailed assignee copy of current App/ROE date:	mitat.			
Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:	Date:			
Phone #:				
Mailed assignee copy of current App/ROE date:	Initial:			
Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:				
Phone #:	 Initial:			
Mailed assignee copy of current App/ROE date:				
Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:	Date:			
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Mailed assignee copy of current App/ROE date:	Initial:			
Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:	Date:			
Phone #:				
Mailed assignee copy of current App/ROE date:	Initial:			
Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:	Date:			
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Mailed assignee copy of current App/ROE date:	Initial:			
Assignment received:	Assignment approved:			
Assignee:	Submitted to Department of Revenue			
Address:Phone #:				
Mailed assignee copy of current App/ROE date:	Initial:			